



Omar Bonderud Award Application



- A. Please give name as it would appear on the award and press releases.
B. Refer questions to the Human Rights Commission at 952-563-8733, TTY 952-563-8740
C. Additional sheets may be used if necessary. PLEASE ANSWER ALL QUESTIONS.

Nominated individual/organization: _____ Phone: _____

Address: _____ Email: _____

Person making nomination: _____ Title: _____

Phone: _____ Email: _____

Necessary Criteria

1. Check those that apply for the time being considered for this award (a nominee **MUST** meet one or more of the following):

- ☐ The nominee(s) lived in Bloomington during the time of their contribution.
- ☐ The nominee(s) conducted business/volunteers in Bloomington during the time of their contribution.
- ☐ The nominee(s) accomplished their contribution to human rights in Bloomington.

2. Check the **“protected classes”** (as defined in the Minnesota Human Rights Act §363A) that were impacted by the nominee(s) efforts. The Commission **MAY** give priority to the nominee(s) whose contributions affected more than one class of vulnerable people.

- | | | | |
|--------------------------------|--|--|---|
| <input type="checkbox"/> Age | <input type="checkbox"/> Dependence on public assistance | <input type="checkbox"/> Marital Status | <input type="checkbox"/> Religion |
| <input type="checkbox"/> Color | <input type="checkbox"/> Disability | <input type="checkbox"/> National Origin | <input type="checkbox"/> Sex |
| <input type="checkbox"/> Creed | <input type="checkbox"/> Family Status | <input type="checkbox"/> Race | <input type="checkbox"/> Sexual Orientation |

3. Please itemize and describe the acts/activities, including impact, length of time, number of people impacted, etc.

Act/activity: _____ Protected Class: _____

Length of time: _____ # Bloomington residents: _____ # other people impacted: _____

- Describe how this act/activity represents a substantial effort toward educating, winning or preserving equality and justice for the identified “protected classes.”

4. Please describe any efforts of the nominee(s) to protect and/or enhance rights outside normal employment, instead of duties performed as part of their job description or business plan.

List additional acts/activities on the back or additional sheets.

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Act/activity: _____ Protected Class: _____

Length of time: _____ # Bloomington residents: _____ # other people impacted: _____

Describe how this act/activity represents a substantial effort toward educating, winning or preserving equality and justice for the identified "protected classes."

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